

TENANT FIT UP

This form is for **change of use** only, with no change in floor area or coverage.

ADDRESS OF PROPERTY: _____

NAME OF COMPLEX _____

TAX MAP _____ **BLOCK** _____ **LOT** _____ **ZONING DISTRICT** _____

NAME OF TENANT'S BUSINESS: _____

PROPOSED USE OF TENANT'S SPACE: _____

AREA OF TENANT'S SPACE IN SQUARE FEET: _____ **sq. ft.**

Additional information may be necessary to determine compliance.

Any new signs or change in signage will require a certificate of zoning compliance and a building permit.

The undersigned states that information submitted with this application is correct and acknowledges that any approval based on erroneous or incomplete information shall be null and void.

Tenant's Name _____ Property Owner _____

Address _____ Address _____

Phone _____ Phone _____

E-mail _____ E-mail _____

Signature _____ **Signature** _____

FOR OFFICE USE ONLY:

_____ Use covered by previous Site Plan/Special Exception. Receipt Date _____

_____ Site Plan/Special Exception approval required.

signed: _____

Justine K. Gillen, Zoning Enforcement Officer

Date